

Town of Kent Recreation & Parks

★ 2016 Baseball & Softball ★



Kent Recreation offers programs for children from three years old through fifteen years old

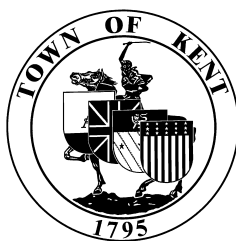
Practices begin in April and season ends in mid to late June with annual parade and awards day!



Programs at all age levels focus on not only baseball/softball skill development but also character building and general fun and enjoyment too

Detailed flyer and registration form can be found on the following pages!

Louis M. Fernandez
Director of Recreation and Parks



Town of Kent Recreation and Parks Department
25 Sybil's Crossing Kent Lakes, NY 10512

Telephone: (845) 531-2100

Fax: (845) 225-5130

Email: recreation@townofkentny.gov

Webpage: www.townofkentny.gov

2016 Kent Recreation Baseball/Softball Registration

Registration begins January 11

Division	Age	Early Registration Fee	Fee after 2/12/16	
Start Smart	Boys and Girls	3 & 4	\$65	\$70
This is a six week instructional program. Parent involvement is required. It runs on Saturday mornings at 9:30am for approximately 1 hour. Participants will receive a Start Smart t-shirt, participant manual, bat and ball set, glove and 2 koosh balls. Schedule: Saturdays, April 23, 30 May 7, 14, 21, (28 No Session), June 4. Participants must be the required age by program start date.				
Hot Shot	Softball and Baseball	5 & 6	\$70	\$80
This is a non-competitive developmental/recreation division (scores will not be kept, no umpires will be used). <u>This division may be coed.</u> A tee is used for batting. Participants will receive a jersey and hat; and at the end of the season a participation medal. There are no playoffs in this division.				
Rookie	Softball and Baseball	7 & 8	\$75	\$85
This is a non-competitive developmental/recreation division (scores will not be kept, no umpires will be used). Coach/mechanical pitching is used in this division. Participants will receive a jersey and hat; and at the end of the season a participation medal. There are no playoffs in this division.				
Minor	Softball and Baseball	9 & 10	\$105	\$115
This is a competitive recreation division (scores will be kept, registered umpires will be used). A player evaluation will be done and teams will be picked by coaches and the league administrator. Players pitch in this division. Participants will receive a uniform (jersey, pants and hats). There will be a postseason in this division. Trophies or medals will be awarded based upon team placement.				
Junior	Softball and Baseball	11 & 12	\$110	\$120
This is a competitive recreation division (scores will be kept, registered umpires will be used). A player evaluation will be done and teams will be picked by coaches and the league administrator. Participants will receive a uniform (jersey, pants and hats). There will be a postseason in this division. Trophies or medals will be awarded based upon team placement.				
Senior	Softball and Baseball	13 - 15	\$130	\$140
This is a competitive recreation division (scores will be kept, registered umpires will be used). A player evaluation will be done and teams will be picked by coaches and the league administrator. Participants will receive a uniform (jersey, pants and hats). There will be a postseason in this division. Trophies or medals will be awarded based upon team placement.				

Boys must be the required age by 4/30/16; Girls must be the required age by 1/1/16

More specific guidelines for each division will be made available upon registration or can be found at the Recreation website

Registration forms may be dropped off or mailed to the Kent Recreation Office

Registration deadline is March 4, 2016!

Kent Recreation and Parks Department

25 Sybil's Crossing Kent Lakes, N.Y. 10512

Phone: 845-531-2100

E-Mail: recreation@townofkentny.gov



2016 Youth Baseball/Softball Registration Form

Fill out form completely. Please print legibly!

Division:	Age:		Early Registration Fee	Registration Fee after 2/12/16	
Start Smart <input type="checkbox"/>	3 & 4	Child must be age by start of program	\$65.00	\$70.00	
Hot Shot <input type="checkbox"/>	5 & 6	Boys must be the required age by 4/30/16	Baseball <input type="checkbox"/> Softball <input type="checkbox"/>	\$70.00	\$80.00
Rookie <input type="checkbox"/>	7 & 8		Baseball <input type="checkbox"/> Softball <input type="checkbox"/>	\$75.00	\$85.00
Minor <input type="checkbox"/>	9 & 10		Baseball <input type="checkbox"/> Softball <input type="checkbox"/>	\$105.00	\$115.00
Junior <input type="checkbox"/>	11 & 12	Girls must be the required age by 1/1/16	Baseball <input type="checkbox"/> Softball <input type="checkbox"/>	\$110.00	\$120.00
Senior <input type="checkbox"/>	13 - 15		Baseball <input type="checkbox"/> Softball <input type="checkbox"/>	\$130.00	\$140.00

Participant Information

Participant's Last Name:		First:		MI:	Birth Date:		Age:	Sex:	
								M <input type="checkbox"/>	F <input type="checkbox"/>
Street Address:				Home Phone Number:			Secondary Phone:		
City:		State:	ZIP Code:	E-Mail			E-Mail 2		
Shirt Size:	Y A	Pant Size:	Y A	Did child play last year?		Which Division?		Which Coach?	
XS S M L XL		XS S M L XL		Yes <input type="checkbox"/>	No <input type="checkbox"/>				

Does your child have any disabilities, allergies or special circumstances we should be aware of? Yes ☐ No ☐

If yes, please explain:

Parent/Guardian Information

Father's Name:		Mother's Name:	
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:

Are you interested in being a volunteer: ☐ Coach ☐ Assistant Coach ☐ Sponsor

Emergency Contact Information

In an emergency please contact:	Relationship to Participant:	Phone Number:	2nd Phone:

Parent or Guardian Authorization, Disclaimer and Waiver of Liability

By law The Kent Recreation and Parks Department cannot and does not provide medical insurance for the participants in its programs. I hereby authorize my son/daughter to participate in the baseball/softball program sponsored by The Kent Recreation Department. I hereby release the agents, servants and employees from any liability for personal injury or property damage sustained by my child in connection with such participation. In the event of injury, I authorize Kent Recreation officials to take my child to a hospital for treatment at my expense.

Date:	Parent or Guardian Signature:
	Please Print Name:

Office Use

Registration Date:	Registration Fee:	<input type="checkbox"/> Cash	Make checks payable to: Kent Recreation	Check Number:	Receipt Number:

Registration End March 4, 2016!